

CENTRE OF EXCELLENCE
GOVT. COLLEGE SANJAULI, SHIMLA-171006
FUND BILL FORM OF PTA/BCA/AF ETC.

Vr. No. _____

dated: _____

S.N.	Drawn in favour of M/S. Dr. /Prof./Ms./Smt.	Particulars of payments.	Amount Rs.	Remarks

Verified passed for payment/adjustment of _____ (Rs. _____ advance
Rs. _____ Expenditure Rs. _____ Balance if any Receipt No. _____ Refunded/paidvide
Cheque No. _____ Date _____ Rs. _____
Only

Dealing

Bursar/Co-Ordinator

Principal